
Guidance from the National Action Alliance for Suicide Prevention to Reporters Covering New CDC Data on Suicide Rates (2001-2021) and Visits to Emergency Departments with Suicidal Ideation (2016-2020).

News outlets are reminded to use best practices for safely and accurately reporting on suicide.

(April 13, 2023) [New data](#) released today by the Centers for Disease Control and Prevention's (CDC) National Center for Health Statistics (NCHS) reports final suicide rates for 2021. Today NCHS also released [data](#) on visits to the emergency department for suicidal ideation between 2016 and 2020.

"These data reinforce the need for urgent action to address suicide as a public health issue. Suicide impacts all communities, and we need to invest in research and interventions that serve those at higher risk," says Colleen Carr, director of the National Action Alliance for Suicide Prevention at EDC. "We must prioritize mental health and suicide prevention in the U.S. by creating lasting cultural, systems, and policy changes that ensure equitable access to the care, support, and services people need—when and where they need them."

As media report on the recent data releases, the National Action Alliance for Suicide Prevention (Action Alliance)'s [Messaging Work Group](#) urges all members of the media (writers, producers, editors, etc.) working on stories about these data and other stories on suicide to refer to the [Recommendations for Reporting on Suicide](#) for best practices for safely and accurately reporting on suicide.

Relevant examples from the guidelines include:

- **Use appropriate language and images**, as certain phrases and images can stigmatize mental health and suicide and undermine prevention objectives. For example:
 - **Avoid** presenting suicide as a common or acceptable response to hardship. **Instead**, report that coping skills, support, and treatment work for most people who have thought about suicide.
 - **Avoid** oversimplifying or speculating on the reasons for suicide. **Instead**, describe warning signs and risk factors, including mental illness, that give suicide context.
 - **Avoid** overstating the problem of suicide by using descriptors like "epidemic" or "skyrocketing." **Instead**, refer to the best available data and use words like "increase" or "rise."
- **Include help-seeking resources** for those seeking help, like the 988 Suicide & Crisis Lifeline. Reference SAMHSA's [988 Partner Toolkit](#), including [988 end cards for media](#), for more tools to share 988.
- **Spread stories of prevention** and integrate voices of lived experience. Including stories about those people who were able to find hope and healing may reduce the risk of contagion and encourage help-seeking in others.

Please refer to the suicide prevention field's full consensus guidelines on reporting on suicide as a resource as you prepare your news content on this event at www.reportingonsuicide.org, as well as the Action Alliance's [Guidelines for Reporting about 988](#).

If you are interested in speaking to someone representing the Action Alliance, please contact ktorguson@edc.org.

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NATIONAL ACTION ALLIANCE FOR SUICIDE PREVENTION:

The [National Action Alliance for Suicide Prevention](#) (Action Alliance) is the public-private partnership working to advance the [National Strategy for Suicide Prevention](#) and make suicide prevention a national priority. The [Substance Abuse and Mental Health Services Administration](#), through the Suicide Prevention Resource Center (SPRC) grant, provides funding to the Education Development Center (EDC) to operate and manage the Secretariat for the Action Alliance, which was launched in 2010. Learn more at theactionalliance.org and join the conversation on suicide prevention by following the Action Alliance on [Facebook](#), [Twitter](#), [LinkedIn](#), and [YouTube](#).